

EXHIBIT 12



**PHARMACY MANAGEMENT CONSULTING
SERVICES**

**Monthly Progress Report
To The
California Prison Health Care
Receivership Corporation**

January 2007

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PHARMACY MANAGEMENT CONSULTING SERVICES

Monthly Progress Report January 2007

Introduction

The California Prison Health Care Receivership Corporation (CPR) and Maxor National Pharmacy Services Corporation (Maxor) entered into an agreement to provide pharmacy management consulting services to achieve necessary improvements to the California Department of Corrections and Rehabilitation (CDCR). The implementation of the Agreement made effective January 1, 2007, commenced on schedule. Key members of the Maxor team arrived in Sacramento on January 1, 2007 and established an administrative office at 428 J Street Ste 610, Sacramento, CA 95814.

With the approval of the Receiver, the Maxor team was able to recruit and make immediately available to the CPR experienced and well qualified correctional pharmaceutical clinicians to wit: Glenn Johnson, MD, Project Manager, Matt Keith, RPh, BCPS, FASHP, Pharmacy Administrator, Dick Cason, RPh, MS, Senior Pharmacy Consultant and Melanie Roberts, RPh, PharmD, Clinical Pharmacy Consultant. Collectively, the management consulting team has over 70 years of direct oversight involvement with correctional and commercial pharmacy programs nationwide.

During this reporting period, the Receiver's office was instrumental in transitioning the Maxor team into the CPR program. Breakout meetings were arranged, security clearances achieved, administrative and operational guidance given and most importantly, the Receiver's direction and priorities were established. These priorities include working closely with the Court's experts in the *Coleman* (mental health) and *Perez* (dental) litigation. Additionally, the Receiver requested and Maxor provided an initial 90 day plan of specific implementation actions which was subsequently reviewed and approved by the Receiver on January 24th.

The collective efforts of the pharmacy improvement program will evolve around the court approved *Road Map to Excellence* adopted by the CPR with priority given to achieving patient safety, evidenced based practice and cost efficiency. Emphasis will be placed on efforts to ensure effective *Plata/Coleman/Perez* interfaces. The required improvements outlined in the *Road Map* are organized into seven primary goals. Each goal is supported by specific objectives and timelines for accomplishing those objectives.

This document provides a status report of the progress made during the month towards achieving each goal, summarizes any changes to the projected timelines, identifies potential obstacles or issues that may delay or impact progress and provides an updated timeline (Appendix A) and financial status (Appendix B) for the project.

Executive Summary of Key Points in this Report

The following summary highlights key accomplishments, identifies any delays experienced and notes obstacles or issues related to achieving the required goals and objectives explained in more detail within this month's Progress Report.

Objectives Completed

- A central pharmacy services administration, budget and enforcement authority was established. (Objective A.1.)
- Direct lines of authority to all pharmacy services personnel and linkage to central medical staff were established with the Receiver's approval. (Objective A.2)

Objectives Delayed

- All objectives are progressing according to schedule.

Obstacles or Issues for Success

Several issues have been identified that may impact the achievement of planned objectives within the expected timeframes or require modification of scheduled work products. Each of these items is being addressed by the Maxor project team with the assistance of the Receiver.

- There is currently no active process for central operational procedure review and approval.
- CDCR lacks a central pharmacy information management system which has contributed to delays in collecting purchasing, prescription and outcomes data for process improvement. Current pharmacy utilization data are unreliable and restricted to purchases. Until such a system is in place, data will remain unreliable.
- The system-wide inventory that was to be conducted during the first quarter to establish a baseline would be of no value in inventory tracking in light of the absence of a CDCR pharmacy management system capable of accurately and uniformly recording dispensing data. Accordingly, Maxor is proposing a change in the timeline of Objective C.2.1. We request to limit the requirement of a system-wide inventory to controlled substances. A system-wide full inventory should occur with the deployment of an interim pharmacy system, which may occur in the first quarter, but is more likely to be completed in the second quarter.

- Initial delays were encountered when attempting to compare CDCR drug purchases with Department of General Services (DGS) contract prices. Access to one specific contract was delayed for a period of several weeks due to legal review.
- Although obtaining and disseminating documentation of Maxor's authority to intercept, review and credit orders to the wholesaler took longer than anticipated, a letter of authority from the Receiver's Chief of Staff was provided January 23, 2007 and actions are now underway.
- An initial audit of CDCR purchases and contract pricing since the initial 2006 Maxor review was conducted. A detailed listing of overcharges in the amount of \$299,000 has been sent to the wholesaler. Since November 2005, eligible rebates in the amount of \$474,000 for Zyprexa were reconciled and the receipt of \$343,000 has been confirmed. The additional \$131,000 is still being researched to ensure credit was received.

Progress Report Detail by Goal

For each goal in the *Road Map*, a summary of actions taken and progress achieved during the last 30 days is listed, along with the identification of any obstacles or issues that may impede progress.

Goal A

Develop meaningful and effective centralized oversight, control and monitoring over the pharmacy services program.

Actions Taken

- Maxor's Sacramento office was established on January 1, 2007 with the opening of project headquarters at 428 J Street Ste 610, Sacramento, CA 95814 (Objective A.1)
- Maxor project team members arrived on site for orientation and initial briefing by Corporate. The team includes a Project Manager, Senior Pharmacy Administrator and two pharmacy consultants. (Objective A.1; also see Appendix C)
- Meetings were conducted with the Receiver and staff to receive initial guidance and project direction. (Objective A.1)
- In conjunction with the Receiver's staff attorney, plans were developed and timelines established for implementing centralized oversight, control and monitoring over the CDCR pharmacy services program. (Objective A.1)
- An initial 90 day plan of action was prepared by the Maxor team and submitted for review and approval to the Receiver's Office. Subsequently, the 90-day plan was approved by letter dated January 24, 2007, from John Hagar, Chief of Staff to the Receiver. Maxor was also directed to work closely with the Court's experts in the additional two health care legal cases *Coleman* (mental health) and *Perez* (dental).

- Job descriptions for Director, Assistant Director and Clinical Pharmacists were finalized. (Objective A.1)
- Recruitment of the Pharmacy Director, Assistant Director and Clinical Pharmacy specialists commenced. Maxor is in the process of assessing and making an offer to an Assistant Director candidate. (Objective A.1)
- An agreement was established with the Receiver on the recruitment of 8 clinical pharmacists and a supplemental fiscal note was submitted for approval. This note establishes the clinical positions as Maxor employees. In addition, the agreement creates a "drop-in" strike team to include a manager and 4 technicians to help remedy problems in pharmacies with significant and immediate service issues. (Objective A.1)
- Early interaction by the Maxor team has additionally identified the need for a professional pharmacy nurse liaison to assist with nursing issues associated with distribution and administration of medications to patients and aid the Maxor Project Manager's efforts to ensure effective *Plata/Coleman/Perez* interfaces. A supplemental budget request was submitted by the Maxor team to the Receiver's Chief of Staff, and has been forwarded to the Receiver with a recommendation for approval. (Objective A.1)
- Meetings with CPR and CDCR staff have commenced and have included interactions with Dr. Terry Hill, Dr. Odegaar-Turner, Dr. Kuykendall, Linda Buzzini, John Hummell, Dr. Justin Graham, the DGS and AmeriSource Bergen to discuss the *Road Map* and future relationships. (Objective A.2)
- A clear organizational chart of reporting relationships and chains of command and coordination was developed with input from and approval by the Receiver's Chief of Staff. A letter was sent by the CPR Chief of Staff to CDCR officials delineating the role of Maxor. (Objective A.2; see Appendix C)
- Lines of communications were established with the CPR and CDCR Health Services office. (Objective A.2)
- With the approval of the Receiver, system wide CDCR Pharmacy staff information briefings on the *Road Map* were scheduled. (Objective A.2)
- A Regional Provider meeting was conducted on January 30, 2007 to provide orientation to the *Road Map* and the organizational structure established by Maxor and the Office of the Receiver. (Objective A.2)
- Central Policies & Procedures were obtained for review during the first quarter. A collection of facility specific Policies & Procedures are also being assembled. (Objective A.3)
- Early policy and procedure revisions will target the Pharmacy & Therapeutics Committee empowerment and essential activities. Suggested changes will be presented to the P&T Committee during its initial February 2007 meeting. (Objective A.3)
- A dashboard of pharmacy utilization was created and is being populated as data becomes available. Information sources and data reliability continue to be assessed. The existing pharmacy system data has been determined to be unreliable, and non-reproducible. Current data sources are limited to medication purchases without individual medical record review. Until a central pharmacy

information management system is instituted, data will remain unreliable. (Objective A.4 & A.5; see Appendix D)

- A project management file structure was created to track activities and initiatives as they develop (Objective A.5)
- An initiative timeline & tracking grid was developed to monitor implementation of the *Road Map*. (Objective A.4 & A.5: see Appendix A)
- A stoplight grid and facility inspection tool was developed to assess baseline facility level adherence to regulations, standards and security concerns. (Objective A.5; see Appendix E)
- A schedule for completing facility inspections has been developed and will be deployed in February. (Objective A.5)
- A disease management guideline (asthma) is under development and will be presented for review of content and form at the March P&T Committee meeting. (Objective A.5)

Objectives Completed

- Objective A.1. A central pharmacy services administration, budget and enforcement authority was established on January 23, 2007.
- Objective A.2. A pharmacy organizational chart was approved by the Receiver establishing direct lines of authority to all pharmacy services personnel and defining linkage to central medical staff.

Issues or Obstacles to Success

- There is currently no active process for central operational procedure review and approval. Recommendations for changes in Pharmacy Policy & Procedures will be prepared for discussion at the first system-wide P&T Committee scheduled for February 13, 2007.
- Current pharmacy utilization data are unreliable and restricted to purchases. There is no reproducible or reliable system for tracking dispensing or outcomes data. Until a central pharmacy information management system is instituted, data will remain unreliable.

Goal B

Implement and enforce clinical pharmacy management processes including formulary controls, Pharmacy and Therapeutics committee, disease management guidelines, and the establishment of a program of regular prison institution operational audits.

Actions Taken

- A reconstituted P&T Committee is being formed—anticipated members are 3 physicians (recommended by Regional MDs), Dr. Odegaard-Turner (Nursing), Jacki Clark (Nursing), Dr. Kuykendall (Dental Services), Dr. Hill, Dr. Winslow, Dr. Jeff Metzner (Coleman psychiatric expert), Dr. Andrew Swanson (Psychiatry) and the Maxor team (Johnson, Keith, Roberts and Cason). (Objective B.1)

- The initial P&T meeting is scheduled for Tuesday, February 13, 2007. The schedule for future meetings will be decided on at the initial meeting. (Objective B.1)
- A P&T Committee Charter is to be established at the first meeting (Objective B.1)
- Health Services Policy & Procedure changes will be recommended to the P&T Committee to establish their organizational structure and empowerment. (Objective B.1)
- A routine agenda format for the P&T Committee has been developed and will be presented. (Objective B.1)
- A new Correctional Formulary (based on the California Common Drug Formulary) is under development and will be presented in February for P&T review and approval. (Objective B.1)
- Formulary adherence and compliance will be reviewed upon approval of the Correctional Formulary. However, it should be noted that until the pharmacy management system is in operation, data gathering will continue to be unreliable. (Objective B.2)
- Therapeutic category utilization reports are being created and trends analyzed for discussion at first P&T meeting. (Objective B.2)
- The first disease management guideline (asthma) will be presented for review of content and style in March. This guideline will serve as the prototype for developing additional guidelines. (Objective B.3)
- Therapeutic category utilization data are being reviewed to determine a schedule for guideline development. Guidelines will focus on chronic illnesses to include asthma, hypertension, diabetes, hyperlipidemia and seizure disorder. Additional guidelines will be created as scheduled by the P&T Committee. (Objective B.3)
- Facility audit procedures have been established. Initial audits will begin statewide in February 2007. (Objective B.4; see Appendix E)

Objectives Completed

- All objectives are in progress.

Issues or Obstacles to Success

- CDCR lacks a central pharmacy information management system which has contributed to delays in collecting prescription and outcomes data for process improvement. Maxor has an interim system in place to collect purchasing and dispensing data. Processing this data is cumbersome and data reliability is a concern as research indicates that dispensing data are not always entered into the existing systems. An integrated pharmacy information management system is vital for all reporting functions in order to provide true targeted process improvement.

Goal C

Establish a comprehensive program to review, audit and monitor pharmaceutical contracting and procurement processes to ensure cost efficiency in pharmaceutical purchases.

Actions Taken

- CDCR purchases were downloaded from Amerisource Bergen (wholesaler) and an audit of contract pricing since the last review was conducted. (Objective C.1)
- A detail listing of overcharges in the amount of \$299,000 has been sent to the wholesaler. A meeting was held to discuss the credit/re-bill process. (Objective C.1)
- Since November 2005, eligible rebates in the amount of \$474,000 for Zyprexa were reconciled and the receipt of \$343,000 has been confirmed. The additional \$131,000 is still being researched to ensure credit was received. A retrospective review from the beginning of the rebate contract through November 2005 will be conducted. (Objective C.1)
- Until a comprehensive data system is in place to intercept, review and edit orders submitted daily to ensure contract compliance, a review schedule has been put in place that continually monitors CDCR purchases to assure that the correct price is charged, eligible rebates are obtained, and contract terms are met. (Objective C.1)
- In light of the absence of a CDCR pharmacy system capable of accurately and uniformly recording dispensing data, we will request a modification to the scope and timing of Objective C2.1. Conducting a system-wide inventory in order to establish a baseline at this time would not be of value from an inventory tracking standpoint.
 - The scope change requested is to limit the requirement of a system-wide inventory and establishment of a baseline to Controlled Substances until an interim pharmacy system is implemented. Controlled Substances have manual dispensing logs that can be used to inventory and immediately begin tracking during the first quarter in accordance with the original time requirement. We will request that a system-wide full inventory occur in conjunction with the deployment of an interim pharmacy management system, which may occur in the first quarter, but is more likely to be completed in the second quarter. This would also allow an audited inventory to be initially loaded into the system from the very beginning. (Objective C.2)
- A procedure is in place to compare all purchases versus dispenses to identify potential diversions or misuse. A written inventory control procedure will be drafted in the first quarter once facility audits are completed. (Objective C.2)
- A meeting with the Department of General Services and the wholesaler was held in order to establish an arrangement for the coordination and improvement of pharmaceutical procurement and contracting activities. An agreed upon method for standardizing order entry through the Echo System was suggested. Once the orders are consolidated in Echo, Maxor's supply system will "intercept" the order,

review it for contract compliance in conjunction with availability at the wholesaler's local distribution centers, edit the order and resubmit it electronically. This will ensure that the best value contracted item is purchased and enable dialogue with the wholesaler to continually stock the appropriate contracted items necessary to meet the demands of CDCR. This process is not anticipated to create a delay in treatment or delivery of the requested drugs. (Objective C.3)

- DGS was provided with access to Maxor's enterprise reporting system and given instruction on how to use the tools to better monitor purchasing for contract compliance and future negotiations. (Objective C.3)
- A meeting with the CPR's Chief Medical Information Officer and Chief Information Officer was held to discuss interim solutions to immediately begin capturing uniform dispensing data and improve patient safety. An agreement will be made after a thorough review of available interim solutions and a CDCR pilot system (Pelican Bay) currently in place. (Objective C.3)
- A review of 340B pricing feasibility has been initiated. This study will assess the feasibility of achieving cost savings through the utilization of 340B pricing to mitigate the rising prescription drug expenditures by the CDCR. This study will be conducted to quantify the potential cost savings for California taxpayers resulting from access to 340B pricing by the CDCR. The study will also address the potential barriers associated with implementing this strategy and the initial steps necessary for establishing a 340B Drug Discount Program. A request to the Receiver's Chief of Staff for permission to engage the Heinz Family Foundation to assist in this review has been made. (Objective C.5)

Objectives Completed

- All objectives are in progress.

Issues or Obstacles to Success

- Initial delays were encountered when attempting to compare CDCR drug purchases with DGS contract prices. Access to one specific contract was delayed for a period of several weeks due to legal review by DGS. On January 26, 2007, Maxor received a letter from the DGS Office of Legal Services expressing their intent to provide the requested contracts. On January 29, 2007, Maxor received the delayed contract in question.
- Although obtaining and disseminating documentation of Maxor's authority to intercept, review and credit orders to the wholesaler took longer than anticipated, a letter of authority was provided January 23, 2007 and actions are now underway.

Goal D

Develop a meaningful pharmacy human resource program that effectively manages staffing, compensation, job descriptions, competency, performance assessment, discipline, training, and use of the workforce including temporary employees and non pharmacist staff.

Actions Taken

- Maxor has requested all staffing agency service contracts for review. Billing summaries will also be reviewed and audited. (Objective D.1)
- Maxor is obtaining staffing levels and position descriptions (CDCR, Registry, Vacant) to populate an employee tracking system. The system will allow the Maxor Team to identify vacancies to be filled as well as provide a tracking mechanism for employee training, education and disciplinary actions. (Objective D.2)
- Web based software was reviewed to identify a product that could provide information (education & training modules created by the Maxor team) to CDCR pharmacy staff and allow for competency assessment tests. Test tracking will assure all staff complete required training. The products assure deployment of important procedural changes, educational information and other key information. (Objective D.2)

Objectives Completed

- All objectives are in progress

Issues or Obstacles to Success

- No significant issues or obstacles encountered to date.

Goal E

Redesign and standardize overall institution level pharmacy drug distribution operations for inpatient and outpatient needs. Design, construct and operate a centralized pharmacy facility.

Actions Taken

- An assessment of potential sites for establishing a centralized pharmacy facility has commenced and including at a minimum: Fresno, Stockton and Sacramento. Criteria include access to lines of transportation (air and ground), location, proximity to pharmaceutical distribution centers, ability to recruit and maintain qualified pharmacy staff and costs. (Objective E.2)
- Contact with potential sources of prepackaged product is occurring. The outsourced product will be considered for pre-centralization to assist facilities in meeting their service and product control needs. (Objective E.2)

- A Maxor team member spent two days at San Quentin reviewing pharmacy and nursing practices and assessing immediate service needs. Operating procedures for a “drop-in” strike team are being formulated. (Objective E.1)

Objectives Completed

- All objectives are in progress

Issues or Obstacles to Success

- No significant issues or obstacles encountered to date.

Goal F

Based on a thorough understanding of redesigned work processes, design and implement a uniform pharmacy information management system needed to successfully operate and maintain the CDCR pharmacy operation in a safe, effective and cost efficient way.

Actions Taken

- A repository of prescription data from the existing PDTS system has been designed for consistent data accumulation and reporting. (Objective F.1)
- Rudimentary utilization reports have been designed and will be distributed to the Receiver and the P&T Committee on a monthly basis and electronically to facilities when connectivity is established. The reports will become more sophisticated as data collection becomes more reliable. (Objective F.1)
- The CPR’s CIO agreed to address all of the connectivity issues between the institutions. In the interim, we will work with him to establish connectivity using commercial digital subscriber line (DSL) and virtual private network (VPN) solutions. (Objective F.2)
- A list of initial equipment necessary to modernize the institutions and implement an interim solution has been provided to the CIO for procurement/authorization. (Objective F.2)
- The use of *Guardian Rx*, a pharmacy information management system that Maxor uses extensively in several operations throughout the nation, is currently being evaluated as a possible interim solution. IT requirements have been identified and submitted to the Receiver’s IT representatives. (Objective F.3)

Objectives Completed

- All objectives are in progress.

Issues or Obstacles to Success

- No significant issues or obstacles encountered to date.

Goal G

Develop a process to assure CDCR pharmacy meets accreditation standards of the designated health care review body (NCCHC or ACA) and assist in obtaining accredited status.

Actions Taken

- No action taken in the first 90-days, pending completion of related objectives.

Objectives Completed

- No objectives completed.

Issues or Obstacles to Success

- No issues or obstacles to date.

Summary of Changes to Timeline

In the sections below, a listing of completed objectives, objective timelines proposed for change (subject to review and approval of CPR) and a listing of timeline changes that have been approved by the CPR are provided.

Objectives Completed

- Objective A.1. A central pharmacy services administration, budget and enforcement authority was established on January 1, 2007.
- Objective A.2. Received Receiver's approval to establish direct lines of authority to all pharmacy services personnel and define linkage to central medical staff.

Objective Timelines Proposed for Change

- As discussed under Goal C above, Maxor requests approval of a modification to the scope and timing of Objective C.2.1:
 - The scope change requested is to limit the requirement of a system-wide inventory and establishment of a baseline to Controlled Substances until an interim pharmacy system is implemented.
 - Modification of the timeline to reflect that a system-wide full inventory will occur in conjunction with the deployment of an interim pharmacy system, which may occur in the first quarter, but is more likely to be completed in the second quarter. .

Objective Timeline Change Approvals

- Objective C.2.1 - timeline change approval pending.

Conclusion

Maxor remains committed to the accomplishment of the *Road Map* goals and objectives and has prepared this Progress Report as part of its ongoing initiative to maintain direct, open and constant communication with CPR throughout the pharmacy improvement project.

Maxor would like to thank the Receiver, his staff, and CDCR for their cooperation and support.

Appendix A— Updated Timeline

Appendix B— Financial Summary




**Appendix C— Project Organization Chart & Authority
Letter**

Appendix D— Pharmacy Dashboard

**Appendix E— Pharmacy Inspection Grid / Monthly
Inspection Form / Baseline Inspection
Profile**

Maxor Timeline and Tracking Grid for Accomplishing Roadmap Objectives

Annual Review

Meeting Target	Not Meeting Target	Will NOT meet Target
		

		IMPLEMENTATION TIME FRAME																																				Owner / Champion
		2007												2008												2009												
Objective	Description	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Status
Progress Report to the Office of Receiver		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	
A.1	Establish a central pharmacy services administration, budget and enforcement authority.																																					Matt Keith / Jim Riley
A.2	Establish direct lines of authority to all pharmacy services personnel and define linkage to central medical staff.																																				Matt Keith / Glenn Johnson	
A.3	Update and maintain system-wide pharmacy policies and procedures.																																				Matt Keith / Angela Serio	
A.4	Establish key performance metrics used to evaluate the performance of the pharmacy services program.																																				Matt Keith / Glenn Johnson	
A.5	Establish standardized monitoring reports and processes designed to continually assess program performance.																																				Matt Keith / Rick Pollard	
B.1	Revise and reconstitute, as needed, the current P&T committee and implement measures to allow for strong P&T oversight of prescribing and dispensing patterns.																																				Matt Keith / Glenn Johnson	
B.2	Establish methodologies and schedules for tracking and monitoring formulary compliance and prescribing behavior.																																				Matt Keith & Kaye Cloutier / Glenn Johnson	
B.3	Develop and implement effective and enforceable peer-reviewed treatment protocols.																																				Matt Keith & Kaye Cloutier / Glenn Johnson	
B.4	Develop and implement effective and enforceable institution audit process.																																				Matt Keith / Angela Serio	
C.1	Monitor wholesaler (vendor) to ensure contract compliance.																																				Ryan Slack / Rick Pollard	
C.2	Develop process to monitor inventory shrinkage.																																				Ryan Slack / Rick Pollard	

Begin Activity	Implementation Activity
<p>1. Read the article and discuss the findings.</p> <p>2. Discuss the implications of the findings for practice.</p> <p>3. Discuss the limitations of the study.</p> <p>4. Discuss the strengths of the study.</p> <p>5. Discuss the future research needs.</p>	<p>1. Read the article and discuss the findings.</p> <p>2. Discuss the implications of the findings for practice.</p> <p>3. Discuss the limitations of the study.</p> <p>4. Discuss the strengths of the study.</p> <p>5. Discuss the future research needs.</p>

Implementation Complete

☐ Ongoing Activity

Progress Report

Annual Review

☹	Not Meeting Target
☹	Will NOT meet Target

		IMPLEMENTATION TIME FRAME																																				Owner / Champion / Status
		2007												2008												2009												
Objective	Description	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	
C.3	Implement process to ensure that the best value contracted item is used.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	Heath Hodg / Jerry Hodge
D.1	Hire and train new employees as needed to replace registry personnel.																																					Matt Keith Angela Serf
D.2	Complete skill set inventory of state and registry employees and provide required training, performance measures, and disciplinary measures as needed for existing employees.																																					Matt Keith Angela Serf
D.3	Develop effective means of documenting and tracking employee training, education, and disciplinary action.																																					Angela Serf / Matt Keith
F.1	Develop and implement improved reporting and monitoring capabilities with existing pharmacy system.																																					Rick Pollard Matt Keith
F.2	Identify and solve connectivity issues throughout all pharmacies to ensure that web-based software, reporting, and data can be easily accessed at each facility.																																					Billy Dedek Rick Pollard
C.4	Consolidate and standardize pharmacy purchasing through development of a centralized supply procurement system.																																					Ryan Slack Rick Pollard
E.1	Prior to centralization, implement standardized operations in all existing institution level operations to correct problems identified in audits.																																					Matt Keith / Glenn Johnson
F.3	Procure a state-of-the-art pharmacy dispensing system.																																					Rick Pollard Matt Keith
F.4	Transition each institution to a uniform pharmacy information management system.																																					Rick Pollard Matt Keith
F.5	Develop and implement reporting tools to facilitate clinical, operational, and fiscal management of the CDCR pharmacy operation.																																					Rick Pollard Matt Keith


Begin Activity **Implementation Activity**

Implementation Complete

☐ Ongoing Activity

Progress Report

Annual Review

 Not Meeting Target
Will NOT meet Target

		IMPLEMENTATION TIME FRAME																																				Owner /
		2007												2008												2009												
Objective	Description	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Champion / Status
C.5	Evaluate feasibility of achieving 340 B preferential pricing on all drug purchases.																																					Carl Birdsong / Jerry Hodges
D.4	Reevaluate previous siting patterns at each institution in light of the adoption of new technologies to improve efficiency and the transition of volume to the centralized pharmacy.																																					Director of Pharmacy / Angela Serio
E.2	Design, construct and operate a centralized pharmacy facility.																																					Matt Keith / Jim Riley
F.6	Integrate pharmacy information management system with auxiliary technologies such as central supply management, physician order entry, electronic MAR, and barcode checking.																																					Rick Pollard / Matt Keith
Process begins once pharmacy operating system selected																																						
G.1	Establish CDCR commitment to pursue accreditation and determine the accrediting organization standards to be followed.																																					Kaye Cloutier / Glenn Johnson
G.2	Develop a readiness grid identifying the standards and assigning assessment responsibilities to members of the team.																																					Kaye Cloutier / Glenn Johnson
G.3	Complete mock audit using credentialled audit for target credentialing body.																																					Kaye Cloutier / Glenn Johnson
G.4	Apply for accreditation audit at one or more institutions. Expand audits to all institutions on a defined schedule.																																					Kaye Cloutier / Glenn Johnson

- (1) The timeframes are contingent upon prerequisite approvals, funding and regulatory issues being addressed in a timely manner.
- (2) Some activities may begin earlier than shown and other activities may slide forward dependent upon the completion of related activities.
- (3) Ongoing activities may include addressing any lingering implementation issues, as well as addressing the transition of activity to the CDCR
- (4) A proposed progress report schedule is included for documenting the accomplishments and identifying the need for schedule changes.

APPENDIX C

CPR Office of the California Prison Receivership **Robert Sillen, Receiver**

Receiver's San Francisco Office
Federal District Courthouse
Law Library 18th Floor
450 Golden Gate Avenue
San Francisco, CA 94102

January 14, 2007

To: Wardens
Health Care Managers/Chief Medical Officers
Regional Administrators
Regional Directors of Nursing
Pharmacists in Charge

Effective January 1, 2007 the Maxor National Pharmacy Services Corporation ("Maxor") commenced a contract with the California Prison Health Care Receivership Corporation ("CPR") to provide pharmacy management consulting services to CPR. Concerning these services, Maxor functions as a consultant empowered by the Receiver to perform services, including direct management services, as summarized in the "Maxor Timeline and Tracking Grid for Accomplishing Roadmap Objectives." In this regard, the requirements for cooperation with the Receiver set forth in Judge Henderson's Order of February 14, 2006 apply fully to Maxor.

Maxor is in the process of establishing direct lines of authority over all California Department of Corrections and Rehabilitation pharmacy services personnel, and is also in the process of establishing direct relations with California's control agencies, including but not limited to the Department of Finance and the Department of General Services. Maxor has established an office at 428 J Street, Suite 610, Sacramento California, 95814 and Dr. Glenn Johnson, Maxor's Project Manager can be reached by telephone at (916) 441-1089.

Yours truly,



John Hagar
Chief of Staff

APPENDIX C - Pharmacy Dashboard Facility Workload

		Actual												FY07 Target or FY06 vs FY07		Stoplight Status (R/Y/G)	Detail Data
Measure	Measure Definitions	CY 2005	CY 2006	CY 2007 YTD	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07	Dec-07	
WORKLOAD	Rx #	Mo Avg	Mo Avg	Mo Avg													
ASP - Avenal State Prison																	
CAL - Calipatria State Prison																	
CCC - Ca Corr Center																	
CCI - Ca Corr Institute																	
CCWF - Central Ca Women's Facility																	
CEN - Centinela State Prison																	
VI - Ca Institute for Men																	
N - Corr Institute for Women																	
CMC - Ca Men's Colony																	
CMF - Ca Medical Facility																	
COR - Ca State Prisons, Corcoran																	
CRC - Ca Rehabilitation Center																	
CTF - Corr Training Facility																	
CVSP - Chuckawalla Valley State Prison																	
DVI - Deuel Vocational Institute																	
FOL - Folsom																	
HDSP - High Desert State Prison																	
ISP - Ironwood State Prison																	
KVSP - Kern Valley State Prison																	
LAC - Ca State Prison LA																	
MCSP - Mule Creek State Prison																	
NKSP - North Kern State Prison																	
PBSP - Pelican Bay State Prison																	
PVSP - Pleasant Valley State Prison																	
RJD - RJ Donovan Corr Facility																	
SAC - California State Prison, Sacramento																	
SATF - California Substance Abuse TF																	
C - Sierra Conservation Center																	
1																	
AL - Ca State Prison, Solano																	
SAQ - San Quentin																	
SVSP - Salina Valley State Prison																	
VSPW - Valley State Prison for Women																	
WSP - Wasco State Prison																	
CDCR Average Rx #/Pharmacy																	
Staffing																	
ASP - Avenal State Prison	RPH #	Mo Avg	Mo Avg	Mo Avg													
CAL - Calipatria State Prison																	
CCC - Ca Corr Center																	
CCI - Ca Corr Institute																	
CCWF - Central Ca Women's Facility																	
CEN - Centinela State Prison																	
CIM - Ca Institute for Men																	
CIW - Corr Institute for Women																	
CMC - Ca Men's Colony																	

White - Under construction
Yellow - Short of target

APPENDIX C - Pharmacy Dashboard Facility Workload

APPENDIX C - Pharmacy Dashboard																			
Facility Workload																			
Measure	Measure Definitions	Actual												FY07 Target or FY06 vs FY07	Stoplight Status (R/Y/G)	Detail Data			
		CY 2005	CY 2006	CY 2007 YTD	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07				Oct-07	Nov-07	Dec-07
WORKLOAD	Rx #	Mo Avg	Mo Avg	Mo Avg															
CMF - Ca Medical Facility																			
COR - Ca State Prisons, Corcoran																			
CRC - Ca Rehabilitation Center																			
CTF - Corr Training Facility																			
CVSP - Chuckawalla Valley State Prison																			
DVI - Deuel Vocational Institute																			
JL - Folsom																			
JSP - High Desert State Prison																			
ISP - Ironwood State Prison																			
KVSP - Kern Valley State Prison																			
LAC - Ca State Prison LA																			
MCSP - Mule Creek State Prison																			
NKSP - North Kern State Prison																			
PBSP - Pelican Bay State Prison																			
PVSP - Pleasant Valley State Prison																			
RJD - RJ Donovan Corr Facility																			
SAC - California State Prison, Sacramento																			
SATF - California Substance Abuse TF																			
SCC - Sierra Conservation Center																			
SOL - Ca State Prison, Solano																			
SQ - San Quentin																			
SVSP - Salina Valley State Prison																			
VSPW - Valley State Prison for Women																			
WSP - Wasco State Prison																			
CDCR Average RPh/Pharmacy																			
Staffing	Tech #	Mo Avg	Mo Avg	Mo Avg															
ASP - Avenal State Prison																			
1 - Calipatria State Prison																			
JC - Ca Corr Center																			
CCI - Ca Corr Institute																			
CCWF - Central Ca Women's Facility																			
CEN - Centinela State Prison																			
CIM - Ca Institute for Men																			
CIW - Corr Institute for Women																			
CMC - Ca Men's Colony																			
CMF - Ca Medical Facility																			
COR - Ca State Prisons, Corcoran																			
CRC - Ca Rehabilitation Center																			
CTF - Corr Training Facility																			
CVSP - Chuckawalla Valley State Prison																			
DVI - Deuel Vocational Institute																			
FOL - Folsom																			
HDSP - High Desert State Prison																			
ISP - Ironwood State Prison																			

APPENDIX C - Pharmacy Dashboard Facility Workload

		Actual												FY07 Target or FY06 vs FY07		Stoplight Status (R/Y/G)	Detail Data
Measure	Measure Definitions	CY 2005	CY 2006	CY 2007 YTD	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07	Dec-07	
WORKLOAD	Rx #	Mo Avg	Mo Avg	Mo Avg													
KVSP - Kern Valley State Prison																	
LAC - Ca State Prison LA																	
MCSP - Mule Creek State Prison																	
NKSP - North Kern State Prison																	
PBSP - Pelican Bay State Prison																	
PVSP - Pleasant Valley State Prison																	
ID - RJ Donovan Corr Facility																	
IC - California State Prison, Sacramento																	
SATF - California Substance Abuse TF																	
SCC - Sierra Conservation Center																	
SOL - Ca State Prison, Solano																	
SO - San Quentin																	
SVSP - Salina Valley State Prison																	
VSPW - Valley State Prison for Women																	
WSP - Wasco State Prison																	
CDCR Average Tech/Pharmacy																	
Number of Rx/Rph		Mo Avg	Mo Avg	Mo Avg													
ASP - Avenal State Prison																	
CAL - Calipatria State Prison																	
CCC - Ca Corr Center																	
CCI - Ca Corr Institute																	
CCWF - Central Ca Women's Facility																	
CEN - Centinela State Prison																	
CIM - Ca Institute for Men																	
CIW - Corr Institute for Women																	
CMC - Ca Men's Colony																	
MF - Ca Medical Facility																	
R - Ca State Prisons, Corcoran																	
RC - Ca Rehabilitation Center																	
CTF - Corr Training Facility																	
CVSP - Chuckawalla Valley State Prison																	
DVI - Deuel Vocational Institute																	
FOL - Folsom																	
HDSP - High Desert State Prison																	
ISP - Ironwood State Prison																	
KVSP - Kern Valley State Prison																	
LAC - Ca State Prison LA																	
MCSP - Mule Creek State Prison																	
NKSP - North Kern State Prison																	
PBSP - Pelican Bay State Prison																	
PVSP - Pleasant Valley State Prison																	
RJD - RJ Donovan Corr Facility																	
SAC - California State Prison, Sacramento																	

White - Under construction
Yellow - Short of target

APPENDIX C - Pharmacy Dashboard Facility Workload

Measure	Measure Definitions	Actual			Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07	Dec-07	FY07 Target or FY06 vs FY07	Stoplight Status (R/Y/G)	Detail Data
		CY 2005	CY 2006	CY 2007 YTD															
WORKLOAD	Rx #	Mo Avg	Mo Avg	Mo Avg															
SAIF - California Substance Abuse TF																			
SCC - Sierra Conservation Center																			
SOL - Ca State Prison, Solano																			
SQ - San Quentin																			
SVSP - Salina Valley State Prison																			
VSPW - Valley State Prison for Women																			
WSP - Wasco State Prison																			
CDCR Average Rx/Rph																			
Number of Rx/Tech		Mo Avg	Mo Avg	Mo Avg															
ASP - Avenal State Prison																			
CAL - Calipatria State Prison																			
CCC - Ca Corr Center																			
CCI - Ca Corr Institute																			
CCWF - Central Ca Women's Facility																			
CEN - Centinela State Prison																			
CIM - Ca Institute for Men																			
CIW - Corr Institute for Women																			
CMC - Ca Men's Colony																			
CMF - Ca Medical Facility																			
COR - Ca State Prisons, Corcoran																			
CRC - Ca Rehabilitation Center																			
CTF - Corr Training Facility																			
CVSP - Chuckawalla Valley State Prison																			
DVI - Deuel Vocational Institute																			
FOL - Folsom																			
HDSP - High Desert State Prison																			
IP - Ironwood State Prison																			
SP - Kern Valley State Prison																			
SAC - Ca State Prison LA																			
MCSP - Mule Creek State Prison																			
NKSP - North Kern State Prison																			
PBSP - Pelican Bay State Prison																			
PVSP - Pleasant Valley State Prison																			
RJD - RJ Donovan Corr Facility																			
SAC - California State Prison, Sacramento																			
SAIF - California Substance Abuse TF																			
SCC - Sierra Conservation Center																			
SOL - Ca State Prison, Solano																			
SQ - San Quentin																			
SVSP - Salina Valley State Prison																			
VSPW - Valley State Prison for Women																			
WSP - Wasco State Prison																			
CDCR Average Rx/Tech																			

White - Under construction
Green - On Hold
Yellow - Short of target

APPENDIX C

California Prison
Receivership

Jerry Hodge, RPh, Chairman, Maxor
John Ward, CEO Maxor
Jim Riley, Sr. VP Correctional Healthcare

CDCR Pharmacy
Improvement Project

Glenn Johnson, MD
Project Manager
Matt Keith, RPh, BCPS, FASHP
Pharmacy Administrator

CDCCR Health Services
Division

California Department
of General Services

Rick Pollard
Operational Support

M. Roberts, PharmD
Clinical Pharmacy

Director Pharmacy
Services

Dick Cason, RPh, MS
Sr. Pharmacy Consultant

K. Cloutier, RN
CQU/MM

Clinical Pharmacists
(Eight)

Asst. Director
Pharmacy (Clinical)

Central Fill Facility
Pharmacy Operations

CDCCR Central Office
Pharmacists

Pharmacy
Nurse Liaison*

**Subject to CPR Approval*

Regional Pharmacist

Regional Pharmacist

Regional Pharmacist

Facility Pharmacies

Legend

CPR	
Maxor Project Team	
CDCCR	

APPENDIX D DASHBOARD

Actual																			
Measure	Measure Definitions	CY 2005	CY 2006	CY 2007 YTD	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07	Dec-07	FY07 Target or FY06 vs FY07	Stoplight Status (R/Y/G)	Detail Data
FISCAL	Drug Purchase \$ PMPM	Mo Avg	Mo Avg	Mo Avg															
ASP - Avenal State Prison			41.66																
CAL - Calipatria State Prison			13.87																
CCC - Ca Corr Center			8.53																
Ca Corr Institute			72.31																
CEN - Central Ca Women's Facility			193.82																
CEN - Centinela State Prison			14.58																
CIM - Ca Institute for Men			152.42																
CIW - Corr Institute for Women			131.68																
CMC - Ca Men's Colony			143.99																
CMF - Ca Medical Facility			462.05																
COR - Ca State Prisons, Corcoran			117.01																
CRC - Ca Rehabilitation Center			57.24																
CTF - CorTraining Facility			29.03																
CVSP - Chuckawalla Valley State Prison			15.48																
DVI - Deuel Vocational Institute			92.45																
FOL - Folsom			44.05																
HDSP - High Desert State Prison			36.04																
ISP - Ironwood State Prison			14.54																
KVSP - Kern Valley State Prison			31.28																
LAC - Ca State Prison LA			66.10																
MCSP - Mule Creek State Prison			103.00																
NKSP - North Kern State Prison			70.18																
PBSP - Pelican Bay State Prison			96.19																
PVSP - Pleasant Valley State Prison			99.14																
RJD - RJ Donovan Corr Facility			134.03																
SAC - California State Prison, Sacramento			172.79																
- California Substance Abuse TF			54.58																
Sierra Conservation Center			23.61																
- Ca State Prison, Solano			94.70																
San Quentin			91.77																
SVSP - Salina Valley State Prison			105.38																
VSPW - Valley State Prison for Women			124.81																
WSP - Wasco State Prison			82.60																
CDCR Average NF+F Drug Cost PMPM			83.04																
Formulary Purchase \$ PMPM	Mo Avg	Mo Avg	Mo Avg																
ASP - Avenal State Prison																			
CAL - Calipatria State Prison																			
CCC - Ca Corr Center																			
CCI - Ca Corr Institute																			
CCWF - Central Ca Women's Facility																			
CEN - Centinela State Prison																			
CIM - Ca Institute for Men																			
CIW - Corr Institute for Women																			
CMC - Ca Men's Colony																			
CMF - Ca Medical Facility																			
COR - Ca State Prisons, Corcoran																			
CRC - Ca Rehabilitation Center																			

White - Under construction

Yellow - Short of target

White - Under construction
Yellow - Short of target

APPENDIX D DASHBOARD

Measure	Measure Definitions	CY 2005	CY 2006	CY 2007 YTD	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07	Dec-07	FY07 Target or FY06 vs FY07	Spotlight Status (R/Y/G)	Detail Data
FISCAL	Drug Purchase \$ PMPM	Mo Avg	Mo Avg	Mo Avg															
	CTF - Corrtaining Facility																		
	CVSP - Chuckawalla Valley State Prison																		
	DVI - Deuel Vocational Institute																		
	FOI - Folsom																		
	HDSP - High Desert State Prison																		
	ISP - Ironwood State Prison																		
	KVSP - Kern Valley State Prison																		
	LA - Ca State Prison LA																		
	MC - Mule Creek State Prison																		
	NC - North Kern State Prison																		
	PBSP - Pelican Bay State Prison																		
	PVSP - Pleasant Valley State Prison																		
	RJD - RJ Donovan Corr Facility																		
	SAC - California State Prison, Sacramento																		
	SATF - California Substance Abuse TF																		
	SCC - Sierra Conservation Center																		
	SOL - Ca State Prison, Solano																		
	SQ - San Quentin																		
	SVSP - Salina Valley State Prison																		
	VSPW - Valley State Prison for Women																		
	WSP - Wasco State Prison																		
	CDCR Average F Cost PMPM																		
	Non-Formulary Purchase \$ PMPM	Mo Avg	Mo Avg	Mo Avg															
	ASP - Avenal State Prison																		
	CAL - Calipatria State Prison																		
	CCC - Ca Corr Center																		
	CCI - Ca Corr Institute																		
	CCWF - Central Ca Women's Facility																		
	CEN - Centinela State Prison																		
	CIM - Ca Institute for Men																		
	CIW - Corr Institute for Women																		
	- Ca Men's Colony																		
	- Ca Medical Facility																		
	- Ca State Prisons, Corcoran																		
	CRC - Ca Rehabilitation Center																		
	CTF - Corrtaining Facility																		
	CVSP - Chuckawalla Valley State Prison																		
	DVI - Deuel Vocational Institute																		
	FOI - Folsom																		
	HDSP - High Desert State Prison																		
	ISP - Ironwood State Prison																		
	KVSP - Kern Valley State Prison																		
	LAC - Ca State Prison LA																		
	MCSP - Mule Creek State Prison																		
	NCSP - North Kern State Prison																		
	PBSP - Pelican Bay State Prison																		
	PVSP - Pleasant Valley State Prison																		
	RJD - RJ Donovan Corr Facility																		
	SAC - California State Prison, Sacramento																		
	SATF - California Substance Abuse TF																		
	SCC - Sierra Conservation Center																		
	SOL - Ca State Prison, Solano																		

APPENDIX D DASHBOARD

Measure	Measure Definitions	CY 2005	CY 2006	CY 2007 YTD	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07	Dec-07	FY07 Target or FY06 vs FY07	Spotlight Status (R/Y/G)	Detail Data
FISCAL	Drug Purchase \$ PMPM	Mo Avg	Mo Avg	Mo Avg															
SQ - San Quentin																			
SVSP - Salina Valley State Prison																			
VSPW - Valley State Prison for Women																			
WSP - Wasco State Prison																			
CDCR Average NF Cost PMPM																			
WORKLOAD	Rx PMPM #	Mo Avg	Mo Avg	Mo Avg															
ASP - Avenal State Prison																			
CAL - Calipatria State Prison																			
Ca Corr Center																			
Ca Corr Institute																			
CCWF - Central Ca Women's Facility																			
CEN - Centinela State Prison																			
CIM - Ca Institute for Men																			
CIW - Corr Institute for Women																			
CMC - Ca Men's Colony																			
CMF - Ca Medical Facility																			
COR - Ca State Prisons, Corcoran																			
CRC - Ca Rehabilitation Center																			
CTF - Corr Training Facility																			
CVSP - Chuckawalla Valley State Prison																			
DVI - Deuel Vocational Institute																			
FOL - Folsom																			
HDSP - High Desert State Prison																			
ISP - Ironwood State Prison																			
KVSP - Kern Valley State Prison																			
LAC - Ca State Prison LA																			
MCSP - Mule Creek State Prison																			
NKSP - North Kern State Prison																			
PBSP - Pelican Bay State Prison																			
PVSP - Pleasant Valley State Prison																			
RJD - RJ Donovan Corr Facility																			
California State Prison, Sacramento																			
California Substance Abuse TF																			
Sierra Conservation Center																			
SOL - Ca State Prison, Solano																			
SO - San Quentin																			
SVSP - Salina Valley State Prison																			
VSPW - Valley State Prison for Women																			
WSP - Wasco State Prison																			
CDCR Average Total Rx # PMPM																			
Formulary Rx PMPM #	Mo Avg	Mo Avg	Mo Avg																
ASP - Avenal State Prison																			
CAL - Calipatria State Prison																			
CCC - Ca Corr Center																			
CCI - Ca Corr Institute																			
CCWF - Central Ca Women's Facility																			
CEN - Centinela State Prison																			
CIM - Ca Institute for Men																			
CIW - Corr Institute for Women																			
CMC - Ca Men's Colony																			
CMF - Ca Medical Facility																			

APPENDIX D DASHBOARD

Measure	Measure Definitions	CY 2005	CY 2006	CY 2007 YTD	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07	Dec-07	FY07 Target or FY06 vs FY07	Stoplight Status (R/Y/G)	Detail Data
FISCAL	Drug Purchase \$ PMPM	Mo Avg	Mo Avg	Mo Avg															
COR - Ca State Prisons, Corcoran																			
CRC - Ca Rehabilitation Center																			
CTF - Corr Training Facility																			
CVSP - Chuckawalla Valley State Prison																			
DVI - Deuel Vocational Institute																			
FOL - Folsom																			
HDSP - High Desert State Prison																			
ISP - Ironwood State Prison																			
- Kern Valley State Prison																			
Ca State Prison LA																			
McSP - Mule Creek State Prison																			
NKSP - North Kern State Prison																			
PBSP - Pelican Bay State Prison																			
PVSP - Pleasant Valley State Prison																			
RJD - RJ Donovan Corr Facility																			
SAC - California State Prison, Sacramento																			
SATF - California Substance Abuse TF																			
SCC - Sierra Conservation Center																			
SOL - Ca State Prison, Solano																			
SQ - San Quentin																			
SVSP - Salina Valley State Prison																			
VSPW - Valley State Prison for Women																			
WSP - Wasco State Prison																			
CDCR Average F # Rx PMPM																			
Non-Formulary Rx PMPM #																			
ASP - Avenal State Prison																			
CAL - Calipatria State Prison																			
CCC - Ca Corr Center																			
CCI - Ca Corr Institute																			
CCWF - Central Ca Women's Facility																			
CEN - Centinela State Prison																			
Ca Institute for Men																			
Corr Institute for Women																			
- Ca Men's Colony																			
CMF - Ca Medical Facility																			
COR - Ca State Prisons, Corcoran																			
CRC - Ca Rehabilitation Center																			
CTF - Corr Training Facility																			
CVSP - Chuckawalla Valley State Prison																			
DVI - Deuel Vocational Institute																			
FOL - Folsom																			
HDSP - High Desert State Prison																			
ISP - Ironwood State Prison																			
KVSP - Kern Valley State Prison																			
LAC - Ca State Prison LA																			
MCSP - Mule Creek State Prison																			
NKSP - North Kern State Prison																			
PBSP - Pelican Bay State Prison																			
PVSP - Pleasant Valley State Prison																			
RJD - RJ Donovan Corr Facility																			
SAC - California State Prison, Sacramento																			
SATF - California Substance Abuse TF																			